

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1 ✓	7/29/62
2 ✓	8/23/62
3 ✓	8/17/62
4 ✓	
5 ✓	
6 ✓	
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48 ✓	
49 ✓	
50 ✓	

Claim	Date
Final	Original
51 ✓	8/17/62
52 ✓	
53 ✓	
54 ✓	
55 ✓	
56 ✓	
57 ✓	
58 ✓	
59 ✓	
60 ✓	
61 ✓	
62 ✓	
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100 ✓	

Claim	Date
Final	Original
101 ✓	
102 ✓	
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148 ✓	
149 ✓	
150 ✓	

If more than 150 claims or 10 actions  
staple additional sheet here

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